AFFIDAVIT OF PHYSICAL PRESENCE and PARENTAGE

Name:		Date of E	irth:	• • • • • • • • • • • • • • • • • • • •					
Social Security No.:		Local Tel	. No.:						
I am a U.S. citizen by:	() Birth in the U.S.() Birth abroad to U.S. citizen parent(s)() Naturalization								
Passport, CRBA or Na	turalization Certi	ficate Number: .							
Date of Issue:		Place: .							
What is your occupation:									
Have you ever been outside international organization	e of the United St , or as the depende	ates as an emplo ent of such an emp	yee of the loyee:	U.S. government or an () YES () NO					
If "yes" list the agency or	organization and	the dates abroad	as an emplo	yee or dependent:					
• • • • • • • • • • • • • • • • • • • •									
Have you worked as a seaman		•							
Have you or one of your pai	rents served in the	united States Ar	med Forces:	() YES () NO					
I have been physically pres	sent in the United	States as follows	:						
PLACE (CITY, STATE)	FROM (Month/Day/Year)	TO (Month/Day/Year)	F	or Office Use					
Please submit evidence to supp from former employers with spe school transcripts, report car discharge slips, or any other Security earning statements ma	y be helpful.	esence such as: Canc ob, pay stubs, cance tion records, utilit hows the date and re	elled passpo illed checks, y bills, lea quired your	rts, tax returns, letters credit card statements, se and rent receipts, signature. Social					
List present and previou									
Spouse's Name	Spouse's DOB	Date and Place o	f Marriage	Date and Manner of Termination					
Have any of your spouses	been married be	fore? () YES	() No If yes:					
Spouse's Name	Name of Previ	ous Spouse D	se Date and Manner of Termination						

List ALL your children ((inc	ludi	ng natural, s	tep and adopte	d), ali	ve or dead.	
Child's Name	М	F	Date of Birth	Place of Birth	Oth	er Parent's Name	Natural Adopted Step

		<u> </u>					
	<u> </u>	<u> </u>					1.1.1.
That, if any child named above claiming United States citized reaches the age of eighteen ye	nship	. I a	gree to provide	and I am the fathe financial support	for such	n wnom such chi child until su	ich child
*NOTE: The preceding phrase may child born out of wedlock to a Section 309(a) of the Immigration	forei	an wor	nan, the child wi	ll not be eligible f	for United	l States citizen:	athered a ship under
That I have been physicall	y pre	esent	t abroad as fo	llows:			
PLACE (CITY, COUNTRY)		DATE	(MONTH/DAY/YR) DATE (MONTH/D	AY/YR)	PURPOSE*	
	From	١		то			
	From	١		то			
	From	۱		то			
	From	۱		To			
	From	١		To			
	From	١		To			
	From	1		To			
*Indicate purpose of trip: vaca							
etc. If working abroad, give n	ame of	f emp	loyer.				
WARNING: False statements or other supporting docume of 18 USC 1001 and/or 18 U	nts a	are p	vingly and will ounishable by 1	Ifully in passpor Fine and/or impri	t appli sonment	cations or af under the pr	fidavits ovisions
I solemnly swear (or affir true and complete to the b purpose of establishing my claim to United States cit	est o rela	of my atior	/ knowledge and iship to the at	d belief and that	this a	ffidavit is f	or the
(Signature of affiant)					Add. :		
(Signature of arritant)							
SUBSCRIBED AND SWORN TO (A	FFIRM	MED)	before me this	s day			
of	., 20	0	at Dhahran,	, Saudi Arabia.	Phone:		
	 a of	 ficei	 r)				